ARIZONA DEPARTMENT OF ECONOMIC SECURITY Senior Community Service Employment Program

PARTICIPANT EVALUATION

Participant's Name (Last, First, Middle):				
Community Service Assignment (CSA) Title:				
Host Agency Name:				
Site Name (If different from host agency):				
Location of Assignment (No., Street, City, State, ZIP Code):				
SELF EVALUATION OF TASK PERFORMANCE (List tasks from Assignment Description)	Above Average	Average	Needs Improvement	Did Not Perform
1.				
2.				
3.				
4.				
5.				
6. Are current duties in keeping with those listed in the Assignment Desc				
If no, please explain: EVALUATION OF COMMUNITY SERVICE ASSIGNMENT	Above Average	Average	Needs Improvement	Did Not Perform
1. Orientation / training	Avoiago		- Improvement	1 01101111
2. Day-to-day supervision				
3. Working conditions				
4. Staff cooperation				
5. Encouragement to participate in agency activities				
6. Adherence to Assignment Description				
7. Encouragement to assume new responsibilities				
8. Value of assignment to obtaining IEP goals				
8. Value of assignment to obtaining IEP goals Comments:				
			Date:	

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